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FROM: Mei Leung**DATE:** February 17, 2005**Number of pages with cover page:****12.**Preparer of this slip has confirmed that facsimile number given is correct: 6823/myl1**CAUTION - CONFIDENTIAL**

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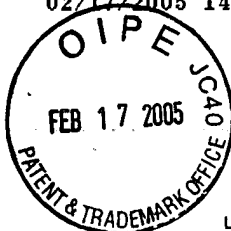
Comments:

Attorney Docket No.: 146712006500
Group Art Unit: 2651
Examiner: A. Sniezek
Serial No.: 10/087,116
Filing Date: March 1, 2002
Inventors: Troy M. HERNDON et al.
Title: SELECTIVELY STIFF FDB BEARING FOR BETTER
SERVO WRITE

Documents enclosed:

- Transmittal Form (1 page)
- Amendment Under 37 C.F.R. §1.312(a) (3 pages)
- Power of Attorney (1 page)
- Revocation of Power of Attorney (1 page)
- Substitution Declaration (2 pages)
- Statement Under 37 CFR 3.73(b) (1 page)
- Part B - Fee(s) Transmittal (original + copy for fee processing (2 pages total))

pa-957135



PTO/SB/21 (09-04)

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<h1 style="text-align: center;">TRANSMITTAL FORM</h1> <p style="text-align: center;">(to be used for all correspondence after initial filing)</p>		Application Number	10/087,116
		Filing Date	March 1, 2002
		First Named Inventor	Troy M. HERNDON
		Art Unit	2651
		Examiner Name	A. Sniezek
Total Number of Pages in This Submission	11	Attorney Docket Number	146712006500

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply (3 pages) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address (1 page) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <ul style="list-style-type: none"> • Revocation of Power of Attorney (1 page) • Substitution Declaration (2 pages) • Statement Under 37 CFR 3.73(b) (1 page) • Part B - Fee(s) Transmittal (original + copy for fee processing (2 pages)) • Facsimile Coversheet
<div style="border: 1px solid black; padding: 5px;">Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	MORRISON & FOERSTER LLP (Customer No. 50269)		
Signature			
Printed name	Christopher B. Eide		
Date	February 17, 2005	Reg. No.	48,375

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Dated: February 17, 2005

Signature:

(Mei Y. Leung)

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